PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This appropriate, All further indicated unless correct maintenance fee notifica	ea below or alrected of	for tran ng the herwise	smitting the ISS Patent, advance o in Block 1, by (UE FEE and PUBLICA orders and notification of a) specifying a new corr	TION FEE (if requirements of maintenance fees very espondence address	ired). Block vill be mail ; and/or (b)	cs 1 through 5 sl ed to the current indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
24998 7590 06/15/2007 DICKSTEIN SHAPIRO LLP 1825 EYE STREET NW					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
Washington, DC 20006-5403					dressed to the Mai nsmitted to the USP	I Stop ISSU TO (571) 27	JE FEE address 73-2885, on the date	above, or being facsimile ate indicated below.
				_				(Depositor's name)
				<u> </u>				(Signature)
- ADDITION BY AND	T			L				(Date)
APPLICATION NO.			FIRST NAMED IN					CONFIRMATION NO.
10/816,921 TITLE OF INVENTION	04/05/2004 : ADJUSTING ELEME	NT DE	VICE	Goran Magnusson		B1705	.0009/P009	3109
APPLN. TYPE	SMALL ENTITY	ISS	UE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TO	TAL FEE(S) DUE	DATE DUE
nonprovisional	YES		\$700	\$300	\$0		\$1000	09/17/2007
EXAMINER			ART UNIT CLASS-SUBCI					
JOYCE, WILLIAM C 3682			3682	074-025000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON 				or agents OR, alternat (2) the name of a sing registered attorney or 2 registered patent attorned in the listed, no name will be	up to 3 registered patent attorneys matively, single firm (having as a member a y or agent) and the names of up to t attorneys or agents. If no name is ill be printed.			
	ess an assignee is identi i in 37 CFR 3.11. Comp				patent. If an assigno assignment.		ied below, the do	cument has been filed for
REAC AB Amal, Sweden								
Please check the appropri	ate assignee category or	categor	ies (will not be pri	inted on the patent):	Individual 🙀 Co	rporation or	other private grou	ip entity Government
a. The following fee(s) are submitted:				b. Payment of Fcc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claims	us (from status indicated SMALL ENTITY statu	s. See 3	7 CFR 1.27.	☐ b. Applicant is no lon			status. See 37 CF)	R 1.27(g)(2).
NOTE: The Issue Fee and nterest as shown by the re	Publication Fee (if requeecords of the United State	ired) wites Pater	ill not be accepted at and Trademark	from anyone other than t Office.	the applicant; a regis	tered attorne	ey or agent; or the	assignee or other party in
Authorized Signature _	Alexander	ai	loff		Date <u>Sept</u>	ember	14, 2007	
Typed or printed name Stephen A. Soffen					Registration No	o31,	063	
This collection of informa n application. Confidenti ubmitting the completed his form and/or suggestio Box 1450, Alexandria, Vi	tion is required by 37 Clality is governed by 35 application form to the ms for reducing this burginia 22313-1450. DO	FR 1.31 U.S.C. USPTO den, sho NOT S	1. The information 122 and 37 CFR 1 2. Time will vary ould be sent to the END FEES OR C	n is required to obtain or a 1.14. This collection is est depending upon the individual of Information Office OMPLETED FORMS TO OMPLETED FORMS TO TO THE TORMS TO TO THE TORMS	retain a benefit by th timated to take 12 m vidual case. Any cor er, U.S. Patent and 1 O THIS ADDRESS	e public whi inutes to co nments on t rademark C	ich is to file (and I mplete, including he amount of time office, U.S. Depar	by the USPTO to process) gathering, preparing, and e you require to complete tment of Commerce, P.O.

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.